CHAPTER 7

SECTION 2 OCCUPATIONAL MEDICAL MONITORING PROGRAM

7.2.1 PURPOSE

The Occupational Medical Monitoring Program is designed for the protection of APHIS employees who are exposed to hazardous chemicals, biologicals, radioactive materials, and hazards such as noise, which could be harmful to their health and welfare. Occupational medical monitoring specified under the program is an added safeguard and does not replace the need to work in an environment which limits exposure to the hazardous material.

7.2.2 GENERAL

Medical monitoring is done specifically to determine the exposure risks to a hazardous material or other inordinate hazards and should not be used by employees in lieu of a complete physical examination by a physician. These examinations also do not replace the use of an industrial hygienist who may be needed to determine levels of exposure and recommend methods of limiting exposure to the hazard.

Medical monitoring in itself does not prevent illness or injury, though it may contribute directly to prevention. In most situations health monitoring is performed to secure maximum preventive benefits at minimal cost and inconvenience. As with all medical monitoring the opportunity for education of the employee is one of the major benefits.

7.2.3 RESPONSIBILITY FOR ESTABLISHING THE PROGRAM

The responsibility for establishing and maintaining an Occupational Medical Monitoring Program in the field will be with the senior line manager at a region, facility, emergency program, or special project, e.g., Regional Directors, Project Leaders, Emergency Program Coordinators, and Laboratory Directors. These managers may delegate in writing the operation of the program. The individual to whom responsibility for operation of the program is delegated will be referred to as the **Occupational Medical Monitoring Program Coordinator (OMMPC).** In most instances this should be the Safety and Health Officer or respective Collateral Duty Safety and Health Officer.

For employees in the Washington, DC metropolitan area, the APHIS Safety and Health Manager will serve as the OMMPC.

7.2.4 EMPLOYEE'S RESPONSIBILITIES

Be knowledgeable of all hazards and hazardous materials that are handled and report to the supervisor unusual exposures.

Be alert in all work environments and report to the supervisor any unusual hazard that has resulted in an exposure, even though the employee is not working directly with the hazard.

Request approval from the supervisor for occupational medical monitoring whenever his/her health and physical well-being are jeopardized.

7.2.5 SUPERVISOR'S RESPONSIBILITIES

Review all job functions under his/her immediate supervision to determine if employees are working with, or being exposed to, any hazard.

Inform employee of hazards associated with his/her job functions.

Establish occupational medical monitoring for any employee working with, or being exposed to, a hazard.

Evaluate all requests by employees for occupational medical monitoring, including the type of hazard involved.

In accordance with Section 3 of this Chapter, utilize APHIS Form 29, Supervisor's Request for Heath Monitoring, to authorize all occupational medical monitoring.

Seek advice and information from the OMMPC, and the Safety, Health, and Environmental Staff (SHES) to assist in determining the proper health monitoring.

7.2.6 OMMPC'S RESPONSIBILITIES

Supervise and coordinate all occupational health monitoring activities within his/her jurisdiction (e.g., brucellosis, psittacosis, and cholinesterase).

Develop a knowledge of all hazardous conditions that employees are exposed to during the performance of their duties.

Monitor and review the results of all occupational monitoring programs and take appropriate actions, if any are deemed necessary, as a result of the occupational monitoring.

Notify the employee of all results of occupational monitoring.

Consult with SHES whenever an unusual or uncommon exposure occurs, for recommendations on the proper occupational monitoring procedures to follow.

7.2.7 EXAMPLES OF OCCUPATIONAL MEDICAL MONITORING

Listed below are situations under which occupational medical monitoring examinations may be applicable:

Preexposure Monitoring - All newly hired employees who will be working with hazardous materials will have a baseline examination before work begins. These examinations should include the specific occupational monitoring tests associated with the employee's job function.

Hazardous Dusts - Employees exposed to dust such as cotton dust, asbestos, etc., should obtain

professional guidance to determine the necessity for chest x-rays and pulmonary function tests.

Organophosphate or Carbamate Exposure - Routine blood cholinesterase determinations will be taken in accordance with Section 5 of this Chapter.

Occupational Bacterial and Viral Diseases - Periodic serological tests should be taken to determine blood titers. Psittacosis and Brucellosis, Sections 6 and 7 respectively, are good examples of this type of monitoring.

Chemical Exposures - The presence of certain chemicals can be specifically detected in the blood stream. However, for those that cannot be detected, it is essential that the employee receive a battery of blood tests to evaluate kidney, liver, and endocrine metabolic functions.

Immunization - Employees exposed to communicable diseases can obtain immunizations (smallpox, typhoid fever, rabies, tetanus), through this occupational health program. (See Section 8, Chapter 7).

7.2.8 COST OF OCCUPATIONAL MEDICAL MONITORING

If possible, employees should be encouraged to use U.S. Military, U.S. Public Health Service, Veterans' Affairs, and other Federal, county, or municipal health units for their medical monitoring examinations. However, employees may use private physicians in locations where such health units do not exist.

Examinations authorized by the supervisor may be paid for from the same APHIS funds as the employee's salary or from the unit's "all other" account. The charge must be reasonable and must not be in excess of the normal charge to the general public.